

**Maricopa Integrated Health Systems
Formulary Prior Auth Criteria**

Drug: Regranex (Becaplermin)

Therapy:

Adjunctive therapy to debridement in the management of lower extremity diabetic neuropathic ulcers that extend into the subcutaneous tissue or beyond, and have an adequate blood supply

Inclusions:

- A. Adequate blood supply to wound site, including palpable pedal/dorsal pulses
- B. Failure of standard wound care as supervised by a healthcare provider (minimum of three months)
- C. Member has been seen in Vascular/Wound clinic or by wound care nurse
- D. Patient or caregiver is able to demonstrate and provide good wound care practices
- E. Ulcer being treated is a Stage III or IV ulcer (ulcer that extends through the dermis into subcutaneous tissue and beyond)
- F. Patient does not demonstrate evidence of wound infection and has appropriate infection control measures.
- G. Patient is not receiving concurrent corticosteroid therapy
- H. Patient is not receiving concurrent cancer chemotherapy
- I. Patient is not receiving concurrent immunosuppressive agents (examples: azathioprine, cyclosporine, prograf, cellcept, etc)
- J. Patient does not have a thermal, electrical or radiation burn at wound site
- K. Patient does not have a neoplasm at site of wound
- L. Patient wound was not closed by primary intention
- M. Patient wound is not subject to repetitive injury or active underlying pathology
- N. Aggressive debridement of the wound as needed

Authorization:

Eight weeks (two tubes)

Further authorization- Reseen by wound nurse or at Vascular/wound clinic and ulcer size decreased by 30% or more for additional month

(Maximum duration of therapy- four months)

Medical Director _____

Date _____